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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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Mend n.31.14

COVER LETTER

TO: Amendment Section Division of Corpor				
NAME OF CORPOR.	ATION: Maste	Marketing La	itin. America, Inc	
DOCUMENT NUMB	er: PKC	0020537		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
_	Felipe ,	Name of Contact Perso ancial & Fox Firm/Company		
		Name of Contact Perso	n	
	Mannfin	ancial & Fox 5	ervices	
_		Firm/ Company		
	4258) NW	109th Place		
_		Address		
	Doval, F	Address City/ State and Zip Cod		
-		City/ State and Zip Cod		
	felipe.mfts	eodlook.com	`	
E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, pleas	e call:		
	1	_	4	
Helipe Y		at (<u>305</u>	431-4394	
Name of	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	
	Certificate of Status	Certified Copy	Certificate of Status	
		(Additional copy is enclosed)	Certified Copy (Additional Copy	
		•·····································	is enclosed)	
Mailing Address Street Address				
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of	
Master Marketina Latin America, Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
1900028537	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	; amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
· · · · · · · · · · · · · · · · · · ·	
C. Parties and the control of a control of the cont	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	学
	5 376
	3 200
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	F , 22
Name of New Registered Agent	
· · · · · · · · · · · · · · · · · · ·	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>У</u> <u>Мі</u>	se Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>vp</u>	Bien Peusado SSA	Calle 67#7-57 of 405 Bogota, Colombia
Remove 2) Change Add	VP_	Pablo Osvaldo Abbate	Monte Elbruz 132 Col. Chapultepec
Remove 3) Change Add			Morales Mexico-co 11570
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	49) nere.			
					
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		-			
			*****		, ,
					
			_ _	-	
			<u> </u>		
				-	
If an amendment provides for an exchange provisions for implementing the amer	ange, reclassifica	tion, or cancella	tion of issued	l shares,	
(if not applicable, indicate N/A)	ignicat ii not con	tained in the an	tenament na	<u></u>	
N/A					
					
					

The date of each amendment(s) adoption: OG 2G 14 date this document was signed. Effective date if applicable: OG 26 14 (no more than 90 days after amendment file date)	, if other than the
Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)	·
by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
DatedCX6 26 14	
Signature (By a director, president of the position of directors or officers have not been selected, by an incorporator of in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
PABLO BENJAMIN ABORTE RETA (Typed or printed name of person signing)	
Prevident (Title of person signing)	

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